OGB -1 INSTRUCTIONS

Read Carefully and Comply Fully

An application (in triplicate) shall be filed with the State Oil and Gas Board and approval obtained before drilling begins. One copy will be returned following approval. Locations which do not comply with applicable spacing rules will be set for public hearing.

This application must be accompanied by:

- \$300.00 permit fee, except for permits to deepen, convert, or amend (Payable to State Treasurer, State of Alabama)
- (2) Certified plat (triplicate)
- (3) Affidavit of Ownership or Control, Form OGB-2 (triplicate); or, Affidavit of Ownership or Control, Underground Injection Control, Form OGB-2C (triplicate); or Affidavit of Ownership or Control, Natural Gas Storage Operations (triplicate), whichever is appropriate
- (4) Bond (Single Well), Form OGB-3; Bond for an Underground Storage Facility for a Solution-mixed Cavity and Storage Well, Form OGB 3D; or Bond (Blanket), Form OGB-4, if not on file with the Board
- (5) Organization report, Form OGB-5, if a current report is not on file with the Board

Make sure that you have given correctly all information requested. Much unnecessary correspondence will thus be avoided. State Oil and Gas Board personnel will not make additions to or change any part of a notarized form.

The certified plat shall show the proposed location of the well within the section or block. If the well is being drilled on a unit greater than the 160-acre size specified in Rule 400-1-2-.02, the plat should also show the alternate unit. The plat shall how the direction of north, the latitude and longitude in decimal degrees to five(5) significant digits and state plane coordinates of the well, be drawn to the scale of one inch equals 1,000 feet, and shall contain both surface and bottom hole locations. Show distances of the proposed well from the nearest unit and section lines, and from the nearest wells in the same section completed in or drilling to the same reservoir. The plat shall also indicate the location and status of all other wells that have been drilled in said section. For the purpose of designating the drilling or production unit in which the proposed well is to be drilled, the boundaries of such unit shall be shown on the plat.

Unless otherwise specified by the Supervisor or Board, the minimum amount of surface or first-intermediate casing to be set below ground level shall be determined from the following table:

Proposed True vertical depth (TVD) (ft)	Minimum casing required	Cement required	Surface casing test pressure (psi)
0 - 4000	300	Circulate to surface	600
4001 - 5000	400	Circulate to surface	600
5001 - 6000	600	Circulate to surface	800
6001 - 7000	800	Circulate to surface	1,000
7001 - 8000	1,000	Circulate to surface	1,000
8001 - 9000	1,400	Circulate to surface	1,000
Deeper than 9000	1,800	Circulate to surface	1,500

The permit number assigned to this well should always be used in correspondence relating to this well.

Form OGB - 1 5 / 00

STATE OIL AND GAS BOARD OF ALABAMA

420 Hackberry Lane P.O. Box 869999

Tuscaloosa, Alabama 35486-6999 (205) 349-2852 Fax (205)349-2861 www.ogb.state.al.us

	Permit number	
01		
	API number	

To be filled in by Board

THE CASE BOARD CO.

Application for Permit to Drill, Deepen, Convert, or Amend*

1945	Drill [Deepen		Convert	Amen	d \square			
				(file in triplic	eate)					
Name of operator						Dat	e			
Address				City		Sta	te	Zip		
Well name and numbe								County		
Well	(give footage from	nearest se	ction or tract lir	nes)			Sec	ction-Township-Range	or tract	
Location	Latitude				L	ongitude]. 🔲			
Field (If wildcat, so state)						Reservo	ir			
Describe drilling unit										
Distance from propose	d location				n 5,280 feet) fro			nearest		
to nearest unit line Proposed depth	Approx. da	fee ate work v			r producible we nticipated depth				feet	
				, ''	10,000 mg/l TD				depth	
Acres assigned to well	(around)				•	on a unit greater than 160 acres in Yes No (If yes, see below)				
If yes, describe alternat accordance with Rule 4				•						
Type Single we bond Blanket	II Amount of bo	ond Bor	nding compai	ny and bond	d number					
Are the provisions of R				rations Invo	olving Hydroger	Sulfide, appli	cable?	Yes No		
If yes, a Form OGB-24 shall be filed with this application. Person to contact					Phone numb	er				
regarding this application					Fax number E-Mail addre	ss				
Remarks:					•	•				
If this is to be a deviated we	ell, please use Form C	GB-1B								
Executed this the	day of		, 20							
						Signa	ture			
Before me, the unde whose name is subscribed has knowledge of the facts	to the above instrum	nent, who b	eing by me dul	y sworn on oa	ath states that he	she is duly auth	orized to ma	known to me to be ake the above report and	the person that he/she	
Subscribed and sworn to b	pefore me this	day of		, 20)					
SEAL					No	otary Public in ar	nd for			
My commission expires					Co	ounty,				
		A	CTION OF	STATE O	OIL AND GAS	BOARD				
APPROVED BY					D.	ATE				